Plenty Valley Christian College Document Classification: Policy Title: OHS – Anaphylaxis Management Policy Version: 2.1 28 April 2015

Background

Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life-threatening. The most common allergens in school aged children are peanuts, eggs, tree nuts (e.g. cashews), cow's milk, fish and shellfish, wheat, soy, sesame, latex, certain insect stings and medication.

The key to prevention of anaphylaxis in schools is knowledge of those students who have been diagnosed at risk, awareness of triggers (allergens), and prevention of exposure to these triggers. Partnerships between schools and parents are important in ensuring that certain foods or items are kept away from the student while at school.

Adrenaline given through an Epipen auto-injector to the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

Duty of care

Parents or guardians are responsible to inform the college of any allergies their child may have on enrolment at PVCC or on subsequent diagnosis of such allergies. Parents or guardians are required to provide the college with an ASCIA Action Plan annually, and advise the college of any significant allergic reactions or changes in the child's diagnosis as they arise. (ASCIA is the Australian Society of Clinical Immunology and Allergy)

For enrolled students with anaphylaxis, an anaphylaxis management plan will be developed in consultation with their parents and teachers. This plan will be reviewed annually.

It is a requirement for parents to provide the school with an epipen auto-injector that is current and not expired.

The College will comply with the provisions of the Occupational Health and Safety Act 2004, the Department of Education's Ministerial Order 706 and the Anaphylaxis Guidelines related to anaphylaxis management as published and amended by DEECD from time to time. These policies dictate the duty of care to students; the College is responsible for providing first aid facilities and sufficient staff trained to an appropriate level of competency in first aid and anaphylaxis management.

The College will Also Complete an Annual Risk Management Checklist in Accordance with Ministerial order 706. A Copy of this Checklist will kept in the first aid room.

As part of the duty of care owed to students: teachers are required to administer first aid when necessary and within the limits of their skill, expertise and training.

In the case of anaphylaxis, this includes following a student's ASCIA Action Plan and administering an Epipen if necessary. It should be noted that a teacher's duty of care is greater than that of the ordinary citizen in that a teacher is obliged to assist an injured student while the ordinary citizen may choose to do nothing.

Staff Training

- o In accordance with Ministerial Order 706, the following school staff must be trained:
 - school staff who conduct classes that students with a medical condition that relates to allergy and the potential for anaphylactic reaction attend; and
 - where there is a student with a medical condition that relates to allergy and the potential for anaphylactic reaction under the care or supervision of the school outside of normal class activities, including in the school yard, at camps and excursions, or at special events conducted, organised or

- attended by the school, the principal must ensure that there is a sufficient number of school staff present who have the correct training.
- any further school staff that the principal identifies, based on an assessment of the risk of an anaphylactic reaction occurring while a student is under the care or supervision of the school.
- o School staff who are subject to training requirements in accordance with the clause above must:
 - have successfully completed an anaphylaxis management training course in the three years prior;
 - participate in a briefing, to occur twice per calendar year with the first one to be held at the beginning of the school year, by a member of school staff who has successfully completed an anaphylaxis management training course in the 12 months prior, on:
 - o the school's anaphylaxis management policy;
 - o the causes, symptoms and treatment of anaphylaxis;
 - o the identities of students with a medical condition that relates to allergy and the potential for anaphylactic reaction, and where their medication is located;
 - o how to use an adrenaline auto-injector, including hands on practise with a trainer adrenaline auto-injector;
 - o the school's general first aid and emergency response procedures; and
 - o the location of, and access to, adrenaline auto-injectors that have been provided by parents or purchased by the school for general use.

If for any reason training and briefing has not yet occurred in accordance with clauses above, the principal must develop an interim plan in consultation with the parents of any affected student with a medical condition that relates to allergy and the potential for anaphylactic reaction, and training must occur as soon as possible thereafter.

INDIVIDUAL ANAPHYLAXIS MANGEMENT PLANS

- The principal or delegate will ensure that an individual management plan is developed, in consultation with the student's parents, for any student who has been diagnosed by a medical practitioner as being at risk of anaphylaxis.
- The individual anaphylaxis management plan will be in place as soon as practicable after the student enrols, and where possible before their first day of school.
- The individual anaphylaxis management plan will set out the following:
 - Information about the diagnosis, including the type of allergy or allergies the student has (based on a diagnosis from a medical practitioner).
 - Strategies to minimise the risk of exposure to allergens while the student is under the care or supervision of school staff, for in-school and out of school settings including camps and excursions.
 - Note: Prevention Strategies (pp 20 30) of the Ministerial Order 706 contains advice about a range of prevention strategies that can be put in place.
 - The name of the person/s responsible for implementing the strategies
 - Information on where the student's medication will be stored
 - The student's emergency contact details,
 - An emergency procedures plan (ASCIA Action Plan for Anaphylaxis), provided by the parent, that:
 - sets out the emergency procedures to be taken in the event of an allergic reaction;
 - is signed by a medical practitioner who was treating the child on the date the practitioner signs the emergency procedures plan; and includes an up to date photograph of the student.
 - Note: The red and blue 'ASCIA Action Plan' is the most common form of emergency procedures plan that is provided by medical practitioners to parents when a child is diagnosed as being at risk of anaphylaxis.
- The student's individual management plan will be reviewed, in consultation with the student's parents/ carers:
 - annually, and as applicable,
 - if the student's condition changes, or
- immediately after a student has an anaphylactic reaction at school It is the responsibility of the parent to:
 - provide the emergency procedures plan (ASCIA Action Plan)
 - inform the school if their child's medical condition changes, and if relevant provide an updated emergency procedures plan (ASCIA Action Plan).

• provide an up to date photo for the emergency procedures plan (ASCIA Action Plan) when the plan is provided to the school and when it is reviewed.

RISK MINIMISATION (Home Economics and Food Technology)

- The home economics teacher will allocate an allergy work bench for students with anaphylaxis or allergies.
- Allergy sets allocated to be used solely by students working on allergy bench.
- Teacher to communicate with parents regarding the curriculum, recipes that will be used and will discuss any concerns they may have.
- Practical tasks will only take place when a permanent staff member is in attendance. A C.R.T will not be charged with this responsibility.
- Students will be responsible for taking their epipens to all home economics classes.
- Parents will notify the school of any change in their child's medical condition as soon as this occurs.

COMMUNICATION

- This policy will serve as a Communication Plan, and will be published on our website and the College-LAN as it is the responsibility of the principal or delegate to provide information to all staff, students and parents about anaphylaxis and the school's anaphylaxis management policy.
- The policy includes information about what steps will be taken to respond to an anaphylactic reaction by a student in a classroom, in the school yard, on school excursions, on school camps and special event days.
- Volunteers and casual relief staff of students at risk of anaphylaxis will be informed of students at risk of
 anaphylaxis and their role in responding to an anaphylactic reaction by a student in their care by the
 relevant Head of school and reference to the policy.
 - All staff will be briefed once each semester by a staff member who has up to date anaphylaxis management training on:
 - the school's anaphylaxis management policy
 - the causes, symptoms and treatment of anaphylaxis
 - the identities of students diagnosed at risk of anaphylaxis and where their medication is located
 - how to use an auto-adrenaline injecting device
 - the school's first aid and emergency response procedures

Management and Emergency Response

First time reactions

If a student has a severe allergic reaction but has not been previously diagnosed with an allergy or as being at risk of anaphylaxis, 000 should be called immediately. Follow any instructions given by emergency services, as well as the college's normal first aid emergency procedures.

Storage and Accessibility of Epipens

- Adrenaline given through an auto-injector such as an Epipen to the outer mid- thigh muscle is the most effective treatment for anaphylaxis.
- Children diagnosed as being at risk of anaphylaxis are prescribed adrenaline in an autoinjector commonly known as the Epipen. Children under 20kg are prescribed an Epipen Junior, which has a smaller dosage of adrenaline. The Epipen and Epipen Junior are designed so that anyone can use them in an emergency.
- If a student has been prescribed an Epipen, the Epipen must be provided by the student's parent/carers to the college.
- Epipens should be stored correctly and accessed quickly. REMEMBER that in some cases, exposure to an allergen can lead to an anaphylactic reaction in as little as FIVE MINUTES. At PVCC, the student's Epipens are kept in individual pigeon holes in the first aid room.
- The college has also purchased generic Epipens as a backup in an emergency and these can be found in insulated containers in the following locations: hanging on the back wall in the staff room, hanging on

the wall inside the door of the secondary humanities office, secondary PE office in the MPH, Siberia Kitchen (T4 Block), Math/Science office on wall inside the door and the first aid room.

- The following factors have been taken into account by the Principal when purchasing generic epipens for use at the College;
 - o the number of students enrolled at the College that have been diagnosed with a medical condition that relates to allergy and the potential for anaphylactic reaction;
 - o the accessibility of epipen auto injectors that have been provided by parents;
 - the availability of a sufficient supply of epipen auto injectors for general use in specified locations at the College, including in the school yard, and at excursions, camps and special events conducted, organised or attended by the school; and
 - that epipen auto injectors have a limited life, usually expire within 12-18 months, and will need to be replaced at the school's expense, either at the time of use or expiry, whichever is first

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- The following rules should apply to the storage of Epipens at school and on any away from school excursions or camps:
 - o Epipens should be stored in an unlocked, easily accessible place away from direct heat. They should not be stored in the refrigerator or freezer.
 - o Epipens should be stored in an insulated container clearly labelled with the student's name.
 - o A copy of the student's ASCIA Action plan should be kept with the Epipen.
 - Each student's Epipen should be distinguishable from other students' Epipens and medications.
 - o All staff should know where the Epipen is located.
 - Epipens should be signed in and out when taken from its usual place, for example for sports trips and excursions.
 - O Depending on the speed of past reactions, it may be appropriate to have an Epipen in the classroom as well.
 - Make sure the Epipen is not cloudy or out of date. Expiry date and clarity of Epipen to be checked monthly by the College Nurse.
 - Epipens should last for at least twelve months and have an expiry date printed on them. It is the parents' responsibility to supply their child's current Epipen auto injector to the college and to replace it before it expires. The college nurse will regularly check the Epipens and send reminders to parents to replace them.

Responding to an incident

If a student shows the first signs and symptoms of an allergic reaction, such as swelling of lips, face or eyes, hives or welts, abdominal pain or vomiting, it is vital to react quickly. Please read the following emergency response procedures and know what to do if a child has an anaphylactic reaction in your care.

When responding to an incident, Staff must complete and incident form. This form can be found at O:\College Nurse\Anaphylaxis Information\Report of Anaphylactic Incident form.pdf on the College LAN, or a copy can be obtained from the College Nurse. The completed report must be sent to the Nurse for filing and further action required.

1. IN THE CLASSROOM

Raise the alarm, locate the Epipen and follow the action plan.

Primary school

- 1.1 Lay child down and reassure; call the office requesting the child's Epipen (state child's name) be brought immediately to the classroom (state which classroom). College nurse or office staff (if nurse is not in attendance) to bring Epipen to the classroom with the ASCIA Action plan and to follow the instructions on the plan.
- 1.2 If the child is showing signs of mild to moderate allergic reaction they will be taken back to the first aid room for strict observation and parents called.
- 1.3 If the child is showing signs of anaphylaxis such as difficulty breathing, swelling of the tongue, tightness in the throat, hoarse voice, wheeze or persistent cough and loss of consciousness then the Epipen will be administered by the nurse (teacher or office staff) with the assistance of the teacher (office staff) to hold the child's leg and 000 called. IF IN DOUBT, GIVE THE EPIPEN.

Secondary school

- 1.4 Lay student down and reassure; call the office requesting the student's Epipen (state student's name) be brought immediately to the classroom (state classroom number). College nurse or office staff (if nurse is not in attendance) to bring Epipen to the classroom with the ASCIA plan and to follow the instructions on the plan. If the phone is not working instruct one student to run to the office and alert office staff to bring Epipen and another child to run and collect the nearest emergency Epipen.
- 1.5 If the student is showing signs of mild to moderate allergic reaction they will be taken back to the first aid room for strict observation and parents called.
- 1.6 If the student is showing signs of anaphylaxis such as difficulty breathing, swelling of the tongue, tightness in the throat, hoarse voice, wheeze or persistent cough and loss of consciousness then the Epipen will be administered by the nurse (teacher or office staff) and 000 called. IF IN DOUBT, GIVE THE EPIPEN.

2. IN THE SCHOOL YARD

Raise the alarm, locate the Epipen and follow the action plan.

Primary school

- 2.1 Stay with the child, lay them down and ask their name. Send another child to the office with an urgent red tag from your first aid bum bag and the child's name. College nurse or office staff to bring the child's Epipen to the child in the playground and follow the ASCIA action plan. Office staff to call for an ambulance.
- 2.2 Follow the same as number 1.5 above.
- 2.3 Follow the same as number 1.6 above.

Secondary school

- 2.4 Stay with the student, lay them down and ask their name. If you have a mobile phone with you, call the office and alert them that there is a student having an anaphylactic reaction, the student's name and the exact location of where to find you. Instruct another student or staff member to collect the emergency Epipen from the wall in the Staff Room or Humanities office. If you do not have a mobile phone with you, send a student to run to the office with the student's name and location. The college nurse (or office staff, if nurse unavailable) will locate the student's Epipen and ASCIA Action plan and will phone for an ambulance and immediately get a lift from the principal's assistant, the principal or the business manager down to the location of the student and follow the ASCIA Action plan.
- 2.5 If the student is showing signs of a mild to moderate allergic reaction they will be driven back up to the first aid room and kept under strict observation and parents called.
- 2.6 If the student is showing signs of anaphylaxis such as difficulty breathing, swollen tongue, swelling or tightness in the throat, difficulty talking, wheeze or persistent cough, loss of consciousness or collapse then the Epipen is to be administered by the school nurse or teacher (or office staff) and 000 called. IF IN DOUBT, GIVE THE EPIPEN.

3. SPORTING ACTIVITIES

Raise the alarm, locate the Epipen and follow the action plan.

Primary and Secondary schools

- 3.1 For in-school activities please take a mobile phone with you making sure you have the office number on it. Stay with the student and lay them down. Call the office and notify them of the child's name and your exact location. If you do not have a phone with you, you will need to send another child to the office to inform them. For secondary teachers, consider taking the emergency Epipen from the PE office down to the oval due to the distance from the first aid room. The college nurse (or office staff, if nurse unavailable) will collect the child's Epipen, ASCIA Action Plan, phone for an ambulance and proceed to your location and follow the action plan and proceed as above.
- 3.2 For out of school sports, the teacher will need to identify the students attending who are at risk for anaphylaxis and collect their Epipens from the first aid room, sign them out and make sure they are kept with the teacher who is supervising that child for the duration of the event. This teacher must carry

a mobile phone with them. This teacher must also have up to date training on anaphylaxis management. If the child has an anaphylactic reaction playing sport, the teacher who has the epipen must stay with the child, lay them down and follow the ASCIA action plan. Then send a student to locate another teacher from our school, if available, to assist you. Call 000 immediately and follow further instructions.

NOTE: Emergency Epipens are not to be removed from where they belong (unless for emergency use). When activities are taking place on the ovals, the students Epipen should be taken from sickbay.

4. EXCURSIONS

Raise the alarm, locate the Epipen and follow the ASCIA Action Plan.

Primary School

4.1 Prior to excursions, teachers need to identify the students at risk for anaphylaxis and invite their parents to attend to help look after them. If they are able to attend, they will be responsible for their child's epipen for the day and following the ASCIA Action plan. If a reaction occurs they must inform a teacher, follow the ASCIA action plan and an ambulance called. The Epipen must still be signed in and out by either the teacher or the parent. Part of the risk assessment for the day, would be to enquire about how long an ambulance would take to get to your location and if longer than twenty minutes then this information should be given to the parents so they are aware of the increased risk. If a parent is unable to attend, then a teacher trained in anaphylaxis management who is supervising the child for the day, will be responsible for carrying the Epipen and staying with the child for the duration of the excursion. If the child has an anaphylactic reaction, the teacher must stay with the child, summons help from another teacher and follow the ASCIA Action plan. They must have a means of calling for an ambulance such as a mobile phone. The Epipen must stay near the child and not be put underneath the bus or left with lunch bags etc. As per PVCC's standard procedures a spare epipen is taken to all excursions in the first aid bag.

Secondary School

4.2 Prior to excursions, teachers need to identify the students at risk for anaphylaxis who will be under their care. On the day of the excursion they must collect the student's Epipen from sickbay and sign it out. They must be trained in anaphylaxis management and have direct supervision of that student for the entire excursion and be responsible for carrying the Epipen. If the student has an anaphylactic reaction, the teacher must stay with the student and follow the ASCIA Action Plan, summons help from another teacher and must have a means of calling for an ambulance such as a mobile phone. The Epipen must stay near the student and not be put underneath the bus or left with lunch bags etc. Part of the risk assessment for the excursion should include how long it would take for an ambulance to reach your location and if more than twenty minutes, parents should be informed of the increased risk. As per PVCC's standard procedures a spare epipen is taken to all excursions in the first aid bag.

5. COLLEGE CAMPS

Raise the alarm, locate the Epipen and follow the ASCIA Action Plan.

Primary school

5.1 The parent/s of students at risk of anaphylaxis are strongly encouraged to attend College camps with their child for the duration. A pre camp meeting will be arranged between the parent and the school; even if the parent is attending the camp, to discuss how food and activities will be handled. When this occurs, the parent may be responsible for the Epipen and the ASCIA action plan and will be assigned to their child's group for all activities. If their child has food allergies, they will also be responsible for liaising with the kitchen staff and will have to either bring separate food and cooking equipment or thoroughly check each meal to make sure it is allergen free for their child. The teacher organizing the camp will be responsible for notifying the camp staff that there will be a child attending at risk of anaphylaxis and providing contact details to parents so they can liaise with the camp kitchen prior to arrival.

5.2 If the child has an anaphylactic reaction, a teacher must be notified and the ASCIA Action plan followed and an ambulance called. Part of the risk assessment for the camp should include how long an ambulance would take to get to your location as for excursions. As per PVCC's standard procedures a spare epipen is taken to all camps in the first aid bag.

Secondary school

- 5.3 The parent/s of students at risk of anaphylaxis are strongly encouraged to attend College camps with their child for the duration. A pre camp meeting will be arranged between the parent and the school; even if the parent is attending the camp, to discuss how food and activities will be handled. Prior to the camp, the year level coordinator should assess which students are at risk of anaphylaxis and a meeting arranged with their parents to discuss strategies to avoid allergens and a management plan developed. From this it can be decided who will be responsible for looking after the Epipen and Action plan, supervising the student, monitoring food supply, providing alternative foods and informing all staff and supervisors of the student's allergy etc. Staff in attendance at the camp must have up to date training in anaphylaxis management and a risk assessment done on how long it would take for an ambulance to attend the location.
- 5.4 If the student has an anaphylactic reaction the teacher in charge of that student must be able to locate the Epipen quickly, raise the alarm, follow the action plan and be able to contact an ambulance. The Epipen must stay near the student at all times for it to be an effective first aid device. As per PVCC's standard procedures a spare epipen is taken to all excursions in the first aid bag.

6. SPECIAL EVENT DAYS

Raise the alarm, locate the Epipen and follow the ASCIA Action plan.

Primary and secondary schools

- 6.1 For special event days such as athletic or swimming carnivals, held outside the College, home room or classroom teachers will need to be aware of the students in their care who are at risk of anaphylaxis and collect and sign out the Epipen on the morning of the event. The Epipen should travel with the teacher on the same bus as the student. On arrival at the event, the Epipen should be given to the staff member who has been allocated to attend to first aid duties. All Epipens should be stored in the first aid area remembering to keep them out of direct light and below 25 degrees. At the completion of the day, the homeroom or classroom teacher will need to collect the Epipen from the first aid area and return it to the first aid room at school, and sign it back in.
- 6.2 If the student has an anaphylactic reaction at an event, a teacher must stay with them and send for the Epipen and ASCIA action plan to be brought to them and the plan followed. They must have access to a phone to be able to call an ambulance. As per PVCC's standard procedures a spare epipen is taken to all excursions in the first aid bag.

Self-Administration of the Epipen

The decision whether a student can carry their own Epipen should be made when developing the student's Anaphylaxis Management plan, in consultation with the student, the student's parents/carers and the student's medical practitioner.

It is important to note that student's have the right to self-administer if they are able to at the time, but even an 18 year old may not physically be able to self administer due to effects of a reaction. Staff members still have a duty of care to administer an Epipen for students who carry their own Epipens.

If a student self administers an Epipen, they <u>must immediately report</u> to a staff member and <u>000 must be</u> called.

NOTE: If a student carries their own Epipen, a second Epipen (provided by the parent) should be kept on site, in the first aid room.

Post incident support

An anaphylactic reaction can be a very traumatic experience for the student, others witnessing the reaction and parents/carers. In the event of an anaphylactic reaction, students and staff may benefit from post-incident counselling provided by the school counsellor or school nurse.

Review management processes

• If there has been an anaphylactic reaction:

- The Epipen must be replaced by the parent before the student returns to school.
- The school should review the student's anaphylaxis Management plan and ASCIA Action plan with the student, student's parents and medical practitioner.
- Appropriate steps should be taken to reassure the student and parents. This may include closer monitoring of the student by school staff, having the student carry the Epipen at all times and updated training for staff.

Working with parents/carers of students at risk of anaphylaxis

Teachers should be aware that parents/carers of a child who is at risk of anaphylaxis may experience high levels of anxiety about sending their child to school. It is important to encourage an open and cooperative relationship with parents/carers so that they can feel confident that appropriate management strategies are in place.

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Staff & Parents

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Approved By Date

APPROVED
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Chairperson OHS Committee
